



**CERTIFICATION OF PUBLIC RECORD  
PURSUANT TO FED. R. EVID. 902(4)**

I, RoseAnn Varnadore, Bureau Chief for Commercial Information Services, Custodian of Records for the Division of Corporations, Florida Department of State, hereby certify that the attached are true copies of all filings of ONE SOLUTION GROUP, LLC, document number L19000285391, a limited liability company organized under the laws of the State of Florida, as shown by the official records on file with said Division.

A handwritten signature in black ink that reads "RoseAnn Varnadore". The signature is written in a cursive style.

RoseAnn Varnadore  
September 28, 2022



*Robert M. [unclear]*



# State of Florida



## Department of State

I certify the attached is a true and correct copy of the complete file of ONE SOLUTION GROUP, LLC, a limited liability company, organized under the laws of the State of Florida, as shown by the records of this office.

The document number of this company is L19000285391.

I further certify that said company was voluntarily dissolved on January 11, 2021.

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this the  
Twenty-seventh day of September, 2022



CR2E022 (01-11)

Cord Byrd  
Secretary of State



**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L19000285391  
FILED 8:00 AM  
November 18, 2019  
Sec. Of State  
vherring

**Article I**

The name of the Limited Liability Company is:  
ONE SOLUTION GROUP, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
1000 WEST HALLANDALE BEACH BLVD  
STE 105  
HALLANDALE BEACH, FL. 33009

The mailing address of the Limited Liability Company is:  
1000 WEST HALLANDALE BEACH BLVD  
STE 105  
HALLANDALE BEACH, FL. 33009

**Article III**

Other provisions, if any:

ONE SOLUTION GROUP, LLC PROVIDES FINANCIAL SERVICES TO BUSINESSES, INVESTORS, OR INDIVIDUALS PREPARING FOR THE FUTURE. WE HELP CLIENTS REACH THEIR GOALS WITH REAL ESTATE, LIFE AND HEALTH INSURANCE, CREDIT REPAIR AND FINANCIAL CONSULTING.

**Article IV**

The name and Florida street address of the registered agent is:  
JOFF PHILOSSAINT  
1000 WEST HALLANDALE BEACH BOULEVARD  
117  
HALLANDALE BEACH, FL. 33009

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: JOFF PHILOSSAINT

### **Article V**

The name and address of person(s) authorized to manage LLC:

Title: AMBR  
STELLE MARTIAL  
5502 WASHINGTON STREET, 113D  
HOLLYWOOD, FL. 33021

Title: AMBR  
LEONARDO LUCAS  
1520 NW 55TH AVE  
LAUDERHILL, FL. 33313

Title: AMBR  
JOFF PHILOSSAINT  
1000 WEST HALLANDALE BEACH BLVD, STE 117  
HALLANDALE BEACH, FL. 33009

**L19000285391**  
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**vherring**

### **Article VI**

The effective date for this Limited Liability Company shall be:

11/17/2019

Signature of member or an authorized representative

Electronic Signature: JOFF PHILOSSAINT

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT****FILED**

DOCUMENT# L19000285391

**Jun 29, 2020****Entity Name:** ONE SOLUTION GROUP, LLC**Secretary of State****6967473823CC****Current Principal Place of Business:**1000 W PEMBROKE RD  
SUITE 105  
HALLANDALE BEACH, FL 33009**Current Mailing Address:**1000 W PEMBROKE RD  
SUITE 105  
HALLANDALE BEACH, FL 33009 US**FEI Number:** 84-3883448**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PHILOSSAINT, JOFF  
1000 WEST HALLANDALE BEACH BOULEVARD  
117  
HALLANDALE BEACH, FL 33009 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Authorized Person(s) Detail :**

Title	AMBR
Name	MARTIAL, STELLE
Address	5502 WASHINGTON STREET, 113D
City-State-Zip:	HOLLYWOOD FL 33021

Title	AMBR
Name	LUCAS, LEONARDO
Address	1520 NW 55TH AVE
City-State-Zip:	LAUDERHILL FL 33313

Title	AMBR
Name	PHILOSSAINT, JOFF
Address	1000 W PEMBROKE RD STE 117
City-State-Zip:	HALLANDALE BEACH FL 33009

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.***SIGNATURE:** STELLE MARTIAL**MANAGER****06/29/2020**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date

**FILED**  
**Jan 11, 2021**  
**Secretary of State**

## **ARTICLES OF DISSOLUTION**

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:

ONE SOLUTION GROUP, LLC

The document number of the limited liability company: L19000285391

The file date of the articles of organization: November 18, 2019

The effective date of the dissolution if not effective on the date of filing: January 11, 2021

A description of occurrence that resulted in the limited liability company's dissolution:

OUT OF FUND OPENING A NEW ONE

The name and address of the person appointed to wind up the company's activities and affairs:

JOFF PHILOSSAINT  
1000 W PEMBROKE ROAD, STE 302  
HALLANDALE BEACH, FL 33009

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: STELLE MARTIAL

Electronic Signature of authorized person

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**

DOCUMENT# L19000285391

**Jan 11, 2021**

**Entity Name:** ONE SOLUTION GROUP, LLC

**Secretary of State**

**4980074854CC**

**Current Principal Place of Business:**

1000 W PEMBROKE RD  
SUITE 105  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

1000 W PEMBROKE RD  
SUITE 105  
HALLANDALE BEACH, FL 33009 US

**FEI Number:** 84-3883448

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MARTIAL , STELLE  
1000 WEST HALLANDALE BEACH BOULEVARD  
117  
HALLANDALE BEACH, FL 33009 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** STELLE MARTIAL

01/11/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name MARTIAL, STELLE  
Address 5502 WASHINGTON STREET, 113D  
City-State-Zip: HOLLYWOOD FL 33021

Title AMBR  
Name LUCAS, LEONARDO  
Address 1520 NW 55TH AVE  
City-State-Zip: LAUDERHILL FL 33313

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STELLE MARTIAL

**MBR**

01/11/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date